B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court District of Nevada

In re	James A. Hulin,		Case No.	09-23231
	Michelle M. Hulin			
_		Debtors	Chapter	7

SUMMARY OF SCHEDULES - AMENDED

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	713,145.00		
B - Personal Property	Yes	4	39,350.46		
C - Property Claimed as Exempt	Yes	3			
D - Creditors Holding Secured Claims	Yes	1		638,214.99	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	4		6,477.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	16		395,048.12	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			0.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,975.37
Total Number of Sheets of ALL Schedu	ıles	34			
	To	otal Assets	752,495.46		
		•	Total Liabilities	1,039,740.11	

United States Bankruptcy Court District of Nevada

In re	James A. Hulin,		Case No	09-23231
	Michelle M. Hulin			
_		Debtors,	Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	6,477.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	44,134.74
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	50,611.74

State the following:

Average Income (from Schedule I, Line 16)	0.00
Average Expenses (from Schedule J, Line 18)	5,975.37
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	6,353.88

State the following:

		-
1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		169,720.38
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	5,800.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		677.00
4. Total from Schedule F		395,048.12
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		565,445.50

B6B (Official Form 6B) (12/07)

In re	James A. Hulin,
	Michelle M. Hulin

Debtors

SCHEDULE B - PERSONAL PROPERTY - AMENDED

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on Hand Location: 7561 Cougar Creek Circle, Las Vegas NV	J	18.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan,	Clark County Credit Union - Regular Share Account No. 00 Location: 7561 Cougar Creek Circle, Las Vegas NV	W	50.22
	thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Clark County Credit Union - Money Market Account No. 30 Location: 7561 Cougar Creek Circle, Las Vegas NV	W	0.17
		US Bank Acct. No. 2198 Location: 7561 Cougar Creek Circle, Las Vegas NV	н	508.54
		Clark County Credit Union - Share Draft Account No. 75 Location: 7561 Cougar Creek Circle, Las Vegas NV	W	361.00
		ING Direct Money Market Acct. No.: xxxx-xxxxx7789-xx	w	1.83
		TD Ameritrade Money Market Acct. Parrothead07 Location: 7561 Cougar Creek Circle, Las Vegas NV	J	1.49
		US Bank Health Savings Account #0397	w	183.23
		US Bank Five Star Silver Checking Acct 8771 Location: 7561 Cougar Creek Circle, Las Vegas NV	W	18.51
3.	Security deposits with public utilities, telephone companies.	X		

utilities, telephone companies, landlords, and others.

Sub-Total > 1,142.99
(Total of this page)

³ continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	James A. Hulin,
	Michelle M. Hulin

Case No.	09-23231	

Debtors

SCHEDULE B - PERSONAL PROPERTY - AMENDED

(Continuation Sheet)

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
4.	Household goods and furnishings, including audio, video, and computer equipment.	2 Sofas; 1 Loveseat; 4 Chairs; 1 Ottoman; 1 Dining set; 1 Secretary; 5 Bookcases; 3 Chests; 1 Trunk; 6 Lamps; 3 Beds; 2 Nightstands; 1 Breakfast Table Set; 2 Coat Racks; 1 Home Office Desk; 1 Bar Set; 1 Blackjack Table Set; 4 TV's; 1 Stereo; 1 CD Player; i-pods; 1 Outdoor Furniture Set; 10 Pieces of Luggage Location: 7561 Cougar Creek Circle, Las Vegas NV	I	3,250.00
		Misc Hand Tools; 5 Rolling Dollies; 1 Handtruck Location: 7561 Cougar Creek Circle, Las Vegas NV	J	250.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	18 Wall Hangings; Misc Christmas Decor; Misc Halloween Decor; Misc Outdoor Yard Figurines/Jugs/Decor; Pottery Jugs/Bowls; Photo Books/Novels/Geology Books; Hard Rock Cafe Pin Collection; CD's & DVD's; Record Albums; Knife Collection; Comic Collection Location: 7561 Cougar Creek Circle, Las Vegas NV	J	3,200.00
6.	Wearing apparel.	25 Dress Shirts; 20 Dress Pants; 55 T-Shirts; 20 Sweatshirts; 10 Hats; 5 Coats/Jackets; 20 Pairs of Shoes; 15 Long Sleeve Knit Shirts Location: 7561 Cougar Creek Circle, Las Vegas NV	J	510.00
7.	Furs and jewelry.	1 Oakley Watch; 1 Wedding Ring Location: 7561 Cougar Creek Circle, Las Vegas NV	Н	300.00
		1 Wedding Ring Set Location: 7561 Cougar Creek Circle, Las Vegas NV	W	1,000.00
8.	Firearms and sports, photographic, and other hobby equipment.	1 Tent; 1 Bike & Helmet; 1 Weight Set; 1 Backpack Location: 7561 Cougar Creek Circle, Las Vegas NV	J	345.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	x		
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X		

Sub-Total > **8,855.00** (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re James A. Hulin, Michelle M. Hulin

Case No.	09-23231	

Debtors

SCHEDULE B - PERSONAL PROPERTY - AMENDED

(Continuation Sheet)

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
12.	Interests in IRA, ERISA, Keogh, or	Clark County Credit Union Roth IRA Acct. No. 21	Н	2,300.26
	other pension or profit sharing plans. Give particulars.	Clark County Credit Union IRA Investmetn Acct. No 81	o. W	2,249.23
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	TD Ameritrade Stock Account Parrothead07 Location: 7561 Cougar Creek Circle, Las Vegas NV	J	177.55
	nemize.	ING Direct Stock & ETF Acct. No. xxxx-xxxxx7789-xx Location: 7561 Cougar Creek Circle, Las Vegas NV	W	490.43
14.	Interests in partnerships or joint ventures. Itemize.	x		
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	x		
16.	Accounts receivable.	x		
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X		
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	x		
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x		
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x		
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X		
22.	Patents, copyrights, and other intellectual property. Give particulars.	Copyrighted Logo "Pinwizards"	W	Unknown
		(Tota	Sub-Tot l of this page)	al > 5,217.47

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re James A. Hulin, Michelle M. Hulin

Case No.	09-23231	

Debtors

SCHEDULE B - PERSONAL PROPERTY - AMENDED

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
23.	Licenses, franchises, and other general intangibles. Give particulars.	Х			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2007 Nissan Xterra Location: 7561 Cougar Creek Circle, Las Vegas NV	J	14,475.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.		1 Canon 1DS Camera Outfit; Mole Richardson 750wt Spot Lights; Mole Richardson 250wt Spot Lights; Mole Richardson 1000wt Flood Lights; 1 Rolling Location Cart; 1 Ladder; 12 Light Stands; 2 Boom Stands; Paul Buff Strobe Setup; 2 Mac Computers; 1 Fax/Copy Machine; 1 Printer Location: 7561 Cougar Creek Circle, Las Vegas NV	J	9,660.00
30.	Inventory.	X			
31.	Animals.		3 Cats; 5 Koi fish Location: 7561 Cougar Creek Circle, Las Vegas NV	J	0.00
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 24,135.00 (Total of this page)

Total > **39,350.46**

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (12/07)

11 U.S.C. §522(b)(3)

In re

James A. Hulin, Michelle M. Hulin

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT - AMENDED

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$136,875.
☐ 11 U.S.C. §522(b)(2)	

Value of Current Value of Specify Law Providing Description of Property Claimed Property Without Each Exemption Exemption Deducting Exemption **Real Property** Real property Nev. Rev. Stat. § 21.090(1)(m) 2,201.06 300,145.00 Location: 7561 Cougar Creek Circle, Las Vegas Cash on Hand **Cash on Hand** Nev. Rev. Stat. § 21.090(1)(z) 18.00 18.00 Location: 7561 Cougar Creek Circle, Las Vegas Checking, Savings, or Other Financial Accounts, Certificates of Deposit Clark County Credit Union - Regular Share Nev. Rev. Stat. § 21.090(1)(z) 50.22 50.22 Account No. 00 Location: 7561 Cougar Creek Circle, Las Vegas **Clark County Credit Union - Money Market** Nev. Rev. Stat. § 21.090(1)(z) 0.17 0.17 Account No. 30 Location: 7561 Cougar Creek Circle, Las Vegas US Bank Acct. No. 2198 Nev. Rev. Stat. § 21.090(1)(z) 508.54 508.54 Location: 7561 Cougar Creek Circle, Las Vegas Clark County Credit Union - Share Draft Nev. Rev. Stat. § 21.090(1)(z) 361.00 361.00 Account No. 75 Location: 7561 Cougar Creek Circle, Las Vegas NV 1.83 1.83 **ING Direct Money Market Acct. No.:** Nev. Rev. Stat. § 21.090(1)(z) xxxx-xxxxxx7789-xx TD Ameritrade Money Market Acct. Nev. Rev. Stat. § 21.090(1)(z) 1.49 1.49 Parrothead07 Location: 7561 Cougar Creek Circle, Las Vegas **US Bank Health Savings Account #0397** Nev. Rev. Stat. § 21.090(1)(z) 183.23 183.23 18.51 18.51 **US Bank Five Star Silver Checking Acct 8771** Nev. Rev. Stat. § 21.090(1)(z) Location: 7561 Cougar Creek Circle, Las Vegas N۷

² continuation sheets attached to Schedule of Property Claimed as Exempt

In re James A. Hulin, Michelle M. Hulin

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT - AMENDED

	,		
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Household Goods and Furnishings 2 Sofas; 1 Loveseat; 4 Chairs; 1 Ottoman; 1 Dining set; 1 Secretary; 5 Bookcases; 3 Chests; 1 Trunk; 6 Lamps; 3 Beds; 2 Nightstands; 1 Breakfast Table Set; 2 Coat Racks; 1 Home Office Desk; 1 Bar Set; 1 Blackjack Table Set; 4 TV's; 1 Stereo; 1 CD Player; 2 i-pods; 1 Outdoor Furniture Set; 10 Pieces of Luggage Location: 7561 Cougar Creek Circle, Las Vegas NV	Nev. Rev. Stat. § 21.090(1)(b)	3,250.00	3,250.00
Misc Hand Tools; 5 Rolling Dollies; 1 Handtruck Location: 7561 Cougar Creek Circle, Las Vegas NV	Nev. Rev. Stat. § 21.090(1)(b)	250.00	250.00
Books, Pictures and Other Art Objects; Collectible 18 Wall Hangings; Misc Christmas Decor; Misc Halloween Decor; Misc Outdoor Yard Figurines/Jugs/Decor; Pottery Jugs/Bowls; Photo Books/Novels/Geology Books; Hard Rock Cafe Pin Collection; CD's & DVD's; Record Albums; Knife Collection; Comic Collection Location: 7561 Cougar Creek Circle, Las Vegas NV	<u>s</u> Nev. Rev. Stat. § 21.090(1)(a)	3,200.00	3,200.00
Wearing Apparel 25 Dress Shirts; 20 Dress Pants; 55 T-Shirts; 20 Sweatshirts; 10 Hats; 5 Coats/Jackets; 20 Pairs of Shoes; 15 Long Sleeve Knit Shirts Location: 7561 Cougar Creek Circle, Las Vegas NV	Nev. Rev. Stat. § 21.090(1)(b)	510.00	510.00
<u>Furs and Jewelry</u> 1 Oakley Watch; 1 Wedding Ring Location: 7561 Cougar Creek Circle, Las Vegas NV	Nev. Rev. Stat. § 21.090(1)(a)	300.00	300.00
1 Wedding Ring Set Location: 7561 Cougar Creek Circle, Las Vegas NV	Nev. Rev. Stat. § 21.090(1)(a)	1,000.00	1,000.00
Firearms and Sports, Photographic and Other Hob 1 Tent; 1 Bike & Helmet; 1 Weight Set; 1 Backpack Location: 7561 Cougar Creek Circle, Las Vegas NV	oby Equipment Nev. Rev. Stat. § 21.090(1)(b)	345.00	345.00
Interests in IRA, ERISA, Keogh, or Other Pension of Clark County Credit Union Roth IRA Acct. No. 21	or Profit Sharing Plans Nev. Rev. Stat. § 21.090(1)(r)	2,300.26	2,300.26
Clark County Credit Union IRA Investmetn Acct. No. 81	Nev. Rev. Stat. § 21.090(1)(r)	2,249.23	2,249.23

In re	James A. Hulin,
	Michelle M. Huli

Case No.	09-23231	

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT - AMENDED

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Stock and Interests in Businesses TD Ameritrade Stock Account Parrothead07 Location: 7561 Cougar Creek Circle, Las Vegas NV	Nev. Rev. Stat. § 21.090(1)(r)	177.55	177.55
ING Direct Stock & ETF Acct. No. xxxx-xxxxx7789-xx Location: 7561 Cougar Creek Circle, Las Vegas NV	Nev. Rev. Stat. § 21.090(1)(r)	490.43	490.43
Automobiles, Trucks, Trailers, and Other Vehicles 2007 Nissan Xterra Location: 7561 Cougar Creek Circle, Las Vegas NV	Nev. Rev. Stat. § 21.090(1)(f)	14,475.00	14,475.00
Machinery, Fixtures, Equipment and Supplies Used 1 Canon 1DS Camera Outfit; Mole Richardson 750wt Spot Lights; Mole Richardson 250wt Spot Lights; Mole Richardson 1000wt Flood Lights; 1 Rolling Location Cart; 1 Ladder; 12 Light Stands; 2 Boom Stands; Paul Buff Strobe Setup; 2 Mac Computers; 1 Fax/Copy Machine; 1 Printer Location: 7561 Cougar Creek Circle, Las Vegas	d in Business Nev. Rev. Stat. § 21.090(1)(d)	9,660.00	9,660.00

NV

Total: 41,551.52 339,495.46

B6D (Official Form 6D) (12/07)

In re	James A. Hulin,
	Michelle M. Hulir

Case No	09-23231	

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS - AMENDED

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	band, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONT - NGEN	UNLIQUIDAT	D I SPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxx2250			2008	T	T E D			
America's Servicing Company P. O. Box 60768 Los Angeles, CA 90060-0768		Н	First Mortgage Real property Location: 7561 Cougar Creek Circle, Las Vegas NV		<u> </u>			
	L		Value \$ 300,145.00	Ш			354,298.94	54,153.94
Account No. NC HELOC xxxx-xxxx-xx669 Bank of America P.O. Box 30610 Los Angeles, CA 90030-0610	9	J	2008 Second mortgage Real Property located at 5519 Westerborne Drive, Greensboro, North Carolina 27407					
			Value \$ 170,500.00				35,925.75	0.00
Account No. NV HELOC xxxx-xxxx-xx199 Bank of America P.O. Box 30610 Los Angeles, CA 90030-0610	99	J	2008 Second Mortgage Real property Location: 7561 Cougar Creek Circle, Las Vegas NV					
			Value \$ 300,145.00				117,767.50	115,566.44
Account No. xxx2374 Wells Fargo Home Mortgage P.O. Box 6417 Carol Stream, IL 60197		J	12/2001 First Mortgage Real Property located at 5519 Westerborne Drive, Greensboro, North Carolina 27407					
			Value \$ 170,500.00	1			130,222.80	0.00
continuation sheets attached			(Total of t	Subt his p			638,214.99	169,720.38
			(Report on Summary of So	_	ota ule	-	638,214.99	169,720.38

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B6F (Official Form 6F) (12/07)

In re	James A. Hulin, Michelle M. Hulin		Case No. 09-23231	
-		Debtors	<u> </u>	

AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu Hu	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Q U	SPUTE	AMOUNT OF CLAIM
Account No. Unknown			Unknown	Ť	TED		
Al Schwerin 9647 Lark Circle Fountain Valley, CA 92708		J	Landlord/Former Partner		D		Unknown
Account No. Unknown			Unknown				
Alpha Electrical Signs, Inc. dba Olympic Neon 5225 Wynn Road Las Vegas, NV 89118		С	Contractor for Windmill Property				Unknown
Account No. xxxx-xxxxx0-51009		H	2008				
American Express P.O. Box 0001 Los Angeles, CA 90096-8000		н	Credit card purchases - business expense				1,394.21
					L		1,394.21
Account No. xxxx-xxxxx0-81003 American Express P.O. Box 0001 Los Angeles, CA 90096-8000		н	2008 Credit card purchases				Unknown
15 continuation sheets attached				Subt			1,394.21
			(Total of t	nis	pag	e)	1

In re	James A. Hulin,	Case No	09-23231
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

		ш	sband, Wife, Joint, or Community	С	111	Ь	
	B T	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	DNLLQULDATED	SPUTED	AMOUNT OF CLAIM
Account No. xxxx-xxxxx3-62001			2008		E		
American Express P.O. Box 0001 Los Angeles, CA 90096-8000		W	Credit card purchases		D		2,259.18
Account No. xxxx-xxxxx9-92005			2008 Credit Card Purchases				2,200.10
American Express P.O. Box 0001 Los Angeles, CA 90096-8000		Н	Credit Gard Furchases				
							27,711.17
Account No. xxxx-xxxxx5-91009			2008				
American Express P.O. Box 0001 Los Angeles, CA 90096-8000		Н	Credit Card Purchases - business expense				
							16,976.85
Account No. xxxx-xxxxx5-91006			2008				
American Express P.O. Box 0001 Los Angeles, CA 90096-8000		W	Credit Card Purchases - business expense				
							16,501.37
Account No. xxxx-xxxxxx-x1283			10/2005 Credit Card Purchases - Authorized Account				
American Express PO Box 297812 Fort Lauderdale, FL 33329		W	Credit Gald Fulchases - Authorized Account				
							2,308.00
Sheet no. <u>1</u> of <u>15</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	<u> </u>		(Total of	Sub this			65,756.57

In re	James A. Hulin,	Case No. 09-23231	
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

		_		-		-	1
CREDITOR'S NAME,	СОДЕВТ	Hus	sband, Wife, Joint, or Community	CONT	l N	P	
MAILING ADDRESS	Ď	н	DATE OF AIM WAS DISCURDED AND	Ň	Į į	ISPUTED	
INCLUDING ZIP CODE,	l E	W	DATE CLAIM WAS INCURRED AND	11	ľ	۱۲	
AND ACCOUNT NUMBER	Ť	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	Ņ	ũ	Ĭ	AMOUNT OF CLAIM
(See instructions above.)	O R	С	is subject to seture, so state.	N G E N	l b	E	
Account No. xxxx-xxxxxx-x9973	┢	Н	5/1886	⊢ N T	UNLIQUIDATED		
	1		Credit Card Purchaes		b		
American Express							
PO Box 297812		н					
Fort Lauderdale, FL 33329							
							25,821.00
Account No. xxxx-xxxxxx-x2381			7/2005	\top	H		
	1		Credit Card Purchases				
American Express						1	
PO Box 981537		w					
		' '					
El Paso, TX 79998							
							3,383.00
Account No. xxxx-xxxxxx-x2001	┢		Credit Card Purchases	+			3,000.00
Account No. XXXX-XXXXXX-X2001	1		Credit Card Purchases				
American Express							
P.O. Box 0001		w					
		**					
Los Angeles, CA 90096-8000							
							2,259.18
Account No. xxxxxxxxxxxxx353			10/2005				
	1		Credit Card Purchases				
American Express					1	1	
PO Box 297812		w				1	
		"				1	
Fort Lauderdale, FL 33329							
						1	
							2,308.00
Account No. xxxxx4020			9/16/2008		T	T	
	1		Medical Bill			1	
American Medical Response - Nevada							
P.O. Box 3429		w			1	1	
		"					
Modesto, CA 95353						1	
						1	
							980.53
Sheet no. 2 of 15 sheets attached to Schedule of	-			Sub	tota	1 1	
			/T . 1 . 6				34,751.71
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	

In re	James A. Hulin,	Case No. 09-23231	
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Account No. 835645097					_	_	_	
MAILING ADDRESS INCLUDING 21P CODE, AND ACCOUNT NUMBER (See instructions above.) No. 835645097 No. 835645097 No. 835645097 No. 835645097 No. 8356463 No.	CREDITOR'S NAME.	C	Hu	sband, Wife, Joint, or Community		U	1.	
AT&T P.O. Box 6463 Carol Stream, IL 60197 Account No. xxxxx-xxxxx-6479 Bank of America P. O. Box 17309 Baltimore, MD 21297-1309 Bank of America P. O. Box 15726 Wilmington, DE 19886-5726 Bank of America P. O. Box 17309 Baltimore, MD 21297-1309 Credit Card Purchases (Late Fees related to a CREDIT to her account!) X X Account No. xxxxx-xxxx-xxxx-0239 Bank of America P. O. Box 17309 Baltimore, MD 21297-1309 W Account No. xxxxx-xxxx-xxxx-6695 Bank Of America P. O. Box 17309 Baltimore, MD 21297-1309 Z008 Credit Card Purchases Credit Card Purchases W 19,302. Account No. xxxxx-xxxx-xxxx-6695 Bushinees Expenses J 13,047.	MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	DEBTOR	W J	CONSIDERATION FOR CLAIM. IF CLAIM	N T I N	LIGUL	S P U T E	AMOUNT OF CLAIM
AT&T P.O. Box 6463 Carol Stream, IL 60197 Account No. xxxx-xxxx-xxxx-6479 Bank of America P. O. Box 17309 Baltimore, MD 21297-1309 Bank of America P. O. Box 15726 Wilmington, DE 19886-5726 Bank of America P. O. Box 17309 Baltimore, MD 21297-1309 Credit Card Purchases (Late Fees related to a CREDIT to her account!) X X Account No. xxxx-xxxx-xxxx-0239 Bank of America P. O. Box 17309 Baltimore, MD 21297-1309 Account No. xxxx-xxxx-xxxx-6695 Bank Of America P. O. Box 17309 Baltimore, MD 21297-1309 Account No. xxxx-xxxx-xxxx-6695 Bank Of America P. O. Box 15184 Wilmington, DE 19850-5184 Sheet no3 of _15 sheets attached to Schedule of Subtotal Subtotal	Account No. 835645097			Former Cell Phone Carrier	Т	T		
Description	P.O. Box 6463		J			D		237.45
Bank of America	Account No. xxxx-xxxx-xxxx-6479	t	\vdash	6/2005	T	T	T	
Credit Card Purchases (Late Fees related to a CREDIT to her account!) X X	P. O. Box 17309		J	Credit Card Purchases				26,471.81
Credit Card Purchases (Late Fees related to a CREDIT to her account!) X	Account No. xxxx-xxxx-xxxx-3416	t	\vdash	2008	+	t		
Account No. xxxx-xxxx-vxxx-0239 Bank of America P. O. Box 17309 Baltimore, MD 21297-1309 Account No. xxxx-xxxx-6695 Bank Of America PO Box 15184 Wilmington, DE 19850-5184 Sheet no. 3 of 15 sheets attached to Schedule of O6/2005 Credit Card Purchases Credit Card Purchases - Businees Expenses 13,047.	P. O. Box 15726		w	Credit Card Purchases (Late Fees related to a CREDIT to her account!)			x	75.00
Bank of America P. O. Box 17309 Baltimore, MD 21297-1309 Account No. xxxx-xxxx-6695 Bank Of America PO Box 15184 Wilmington, DE 19850-5184 Sheet no. 3 of 15 sheets attached to Schedule of Credit Card Purchases 2008 Credit Card Purchases - Businees Expenses 13,047.	A grount No. vvvv-vvvv-vvv-0230	╂		06/2005	+	\perp	+	
Bank Of America PO Box 15184 Wilmington, DE 19850-5184 Sheet no. 3 of 15 sheets attached to Schedule of Subtotal	Bank of America P. O. Box 17309		w	Credit Card Purchases				19,302.47
Bank Of America PO Box 15184 Wilmington, DE 19850-5184 Sheet no. 3 of 15 sheets attached to Schedule of Subtotal	Account No. xxxx-xxxx-6695	\vdash	\vdash	2008	+	\vdash	+	
1 54 134	Bank Of America PO Box 15184		J	Credit Card Purchases -				13,047.65
1 54 134	Sheet no. 3 of 15 sheets attached to Schedule of	_		1	Sub	tota	al	
Creations from the Charles Charles (10tal of this page)	Creditors Holding Unsecured Nonpriority Claims							59,134.38

In re	James A. Hulin,	Case No. 09-23231	
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	1			1 -		1-	1
CREDITOR'S NAME,	CODEBT	Hu	sband, Wife, Joint, or Community	CONT	UNL	D	
MAILING ADDRESS	D	Н	DATE CLAIM WAS INCURRED AND	N	ŀ	S P U T E	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	1	Q	ĮŪ	
AND ACCOUNT NUMBER	T	J	IS SUBJECT TO SETOFF, SO STATE.	N	ľ	I T	AMOUNT OF CLAIM
(See instructions above.)	R	С	is separate to sproff, so simile.	G E N	Ď	p	
Account No. xxxx-xxxx-2628	T	Г	2008	N	QUIDATED		
	1		Credit Card Purchases	L	p		
Bank Of America			Business Account linked to Acct 6695				
PO Box 15184		Н					
Wilmington, DE 19850-5184							
							Unknown
Account No. xxxx-xxxx-xxxx-2610			2008	T			
	1		Credit Card Purchases. Business Account				
Bank Of America	1		linked to 6695				
PO Box 15184	1	W					
Wilmington, DE 19850-5184	1						
]	1						
							Unknown
Account No. xxxx-xxxx-0754	1		2008	+	T	T	
	1		Credit Card Purchases Acct is now 0239				
Bank of America	1						
P. O. Box 15026		w					
Wilmington, DE 19850-5026	1						
willington, DE 19650-5026							
							111
	_						Unknown
Account No. Unknown	_		Unknown				
	1		Contractor for Windmill Property				
Bright Lights	1						
112 Continental Ave	1	С					
Henderson, NV 89015							
,	1						
							Unknown
Account No. xxxx-xxxx-9081			11/2007	T	T	T	
	1		Credit Card Purchases				
CareCredit/GEMB	1						
P.O. Box 960061	1	J					
	1	٦					
Orlando, FL 32896							
	1						
	1						8,405.51
Sheet no. 4 of 15 sheets attached to Schedule of				Sub	tota	al	
Creditors Holding Unsecured Nonpriority Claims			(Total of				8,405.51
Creations froming offsecured nonpriority Claims			(Total of	uns	Pas	50)	

In re	James A. Hulin,	Case No	09-23231
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	1 -			1 -	1	1 -	1
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	6	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Q	ISPUTED	AMOUNT OF CLAIM
Account No. xxxx-xxxx-xxxx-7361			2/2002	7	Ţ		
Chase P.O. Box 36520 Louisville, KY 40233		н	Credit Card Purchases		Ď		
							32,000.00
Account No. xxxx-xxxx-xxxx-3153			12/2006				
Chase P.O. Box 36520 Louisville, KY 40233		w	Credit Card Purchases				
							12,906.91
Account No. xxxx-xxxx-xxxx-6843			2/2002 Credit Card Purchases				
Chase P. O. Box 15298 Wilmington, DE 19850-5298		Н					
							Unknown
Account No. xxxx-xxxx-xxxx-2137			12/2006 Credit Card Purchases				
Chase P. O. Box 15298 Wilmington, DE 19850-5298		w	Credit Card Furchases				
							Unknown
Account No. xxxxxx4181	1		10/2005				
Chrysler Financial P. O. Box 9001921 Louisville, KY 40290-1921		н	2005 Dodge Ram SLT				
							14,362.53
Sheet no5 of _15 _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of	Sub this			59,269.44

In re	James A. Hulin,	Case No. 09-23231	
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Account No. xxxxxxxxxxxxx1101		1.				1	1-	
AND ACCOUNT NUMBER (See instructions above.) Account No. xxxxxxxxxxxx72 Citi P.O. Box 45129 Jacksonville, FL 32232 Communications P.O. Box 99127-3901 Las Vegas, NV 89127-3901 Discover Card P.O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxxxxxxxxxx4631 Discover Card P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx4424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6. of -15_ sheets attached to Schedule of Constitution FC LAIM IS SUBJECT TO SETOFF, SO STATE. Subject TO SETOFF, SO STATE. Subject To Set Subject To Set Set Subject To Set Set Subject To Set Set Subject To Set Set Subject To Set Set Set Set Set To Set Set Set Set To Set Set Set Set Set Set Set To Set	CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	16	U N	D	
AND ACCOUNT NUMBER (See instructions above.) Account No. xxxxxxxxxxxx72 Citi P.O. Box 45129 Jacksonville, FL 32232 Communications P.O. Box 99127-3901 Las Vegas, NV 89127-3901 Discover Card P.O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxxxxxxxxxx4631 Discover Card P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx4424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6. of -15_ sheets attached to Schedule of Constitution FC LAIM IS SUBJECT TO SETOFF, SO STATE. Subject TO SETOFF, SO STATE. Subject To Set Subject To Set Set Subject To Set Set Subject To Set Set Subject To Set Set Subject To Set Set Set Set Set To Set Set Set Set To Set Set Set Set Set Set Set To Set	MAILING ADDRESS	D	Н	DATE CLAIM WAS INCLIDED AND	N	<u> </u>	S	
S NUBRECTIO SETOFF, SO STATE: S NUBRECTIO SETOFF, SO STATE	INCLUDING ZIP CODE,	В		CONSIDERATION FOR CLAIM IF CLAIM	11	ď	Įΰ	
Citi P.O. Box 45129 Jacksonville, FL 32232 Account No. xxx-xxxx-xxxxx1101 Cox Communications P.O. Box 3901 Las Vegas, NV 89127-3901 Discover Card P.O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-xxxx-xxx424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Communications Attached Advances Business Telephone C C 444,134.74 A44,134.74 A44,134.74 A44,134.74 A44,134.74 A44,134.74 A44,134.74 A44,134.74 A44,134.74 A15,000 A44,134.74 A44,		IT		IS SUBJECT TO SETOFE SO STATE	N	ļ۷	Ī	AMOUNT OF CLAIM
Citi P.O. Box 45129 Jacksonville, FL 32232 Account No. xxx-xxxx-xxxxx1101 Cox Communications P.O. Box 3901 Las Vegas, NV 89127-3901 Discover Card P.O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-xxxx-xx424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Communications Attached Account No. xxxx-xxxx-xxxx-4631 Business Telephone C C 444,134.74 444,134.74 44,134.74 444,134.74	(See instructions above.)	Ř	C	is sebsect to seroit, so state.	E	Ď	Þ	
Citi P.O. Box 45129 Jacksonville, FL 32232 Account No. xxx-xxxx-xxxxx1101 Cox Communications P.O. Box 3901 Las Vegas, NV 89127-3901 Discover Card P.O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-xxxx-xx424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Communications Attached Account No. xxxx-xxxx-xxxx-4631 Business Telephone C C 444,134.74 444,134.74 44,134.74 444,134.74	Account No. xxxxxxxxxxxx72				7	TE		
P.O. Box 45129 Jacksonville, FL 32232 C		1		Student Loans	\vdash	D		
Jacksonville, FL 32232 Account No. xxx-xxxxx-xxxxx1101 Cox Communications P. O. Box 3901 Las Vegas, NV 89127-3901 Discover Card P. O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxxx-xxxx-xxx-xxx-xxxx-xxxx-xxxx-xxx	Citi							
Account No. xxx-xxxxxxxxx1101 Cox Communications P. O. Box 3901 Las Vegas, NV 89127-3901 Account No. xxxx-xxxx-4631 Discover Card Picture Card P	P.O. Box 45129		C					
Account No. xxx-xxxxxxxxx1101 Cox Communications P. O. Box 3901 Las Vegas, NV 89127-3901 Account No. xxxx-xxxx-4631 Discover Card Picture Card P	Jacksonville, FL 32232							
Account No. xxxxxxxxxxxx1101 Cox Communications P. O. Box 3901 Las Vegas, NV 89127-3901 Account No. xxxx-xxxx-4631 Discover Card P. O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-xxxx-424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Business Telephone 8/2007 Credit Card Purchase 1 2008 Miscellaneous Purchases 1 1,705.69 Account No. xxxxx-424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of	, and the second							
Cox Communications P. O. Box 3901 Las Vegas, NV 89127-3901 C B/2007 Credit Card Purchase B/2007 Credit Card Purchase C 2,117.71 Account No. xxxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Business Freight Shipments Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Subtotal C 3 8/2007 Credit Card Purchase By 2008 Miscellaneous Purchases 1,705.69 1,705.69 300.00 Sheet no. 6 of 15 sheets attached to Schedule of								44,134.74
P. O. Box 3901 Las Vegas, NV 89127-3901 C	Account No. xxx-xxxx-xxxxx1101			Business Telephone	\dagger			
P. O. Box 3901 Las Vegas, NV 89127-3901 C		1					1	
Las Vegas, NV 89127-3901 Account No. xxxx-xxxx-4631 Discover Card P. O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Business Freight Shipments W Business Freight Shipments 300.00 Sheet no. 6 of 15 sheets attached to Schedule of		1					1	
Account No. xxxx-xxxx-4631 Discover Card P. O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal 513.38 8/2007 Credit Card Purchase 2008 Miscellaneous Purchases 1	P. O. Box 3901		C					
Account No. xxxx-xxxx-4631 Discover Card P. O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal 513.38 8/2007 Credit Card Purchase 2008 Miscellaneous Purchases 1	Las Vegas, NV 89127-3901							
Account No. xxxx-xxxx-4631 Discover Card P. O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal B/2007 Credit Card Purchase 2,117.71 2008 Miscellaneous Purchases 1,705.69 Account No. xxxx-x424-0 W 300.00								
Discover Card P. O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Credit Card Purchase 2,117.71 2008 Miscellaneous Purchases 4								513.38
Discover Card P. O. Box 30395 Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Credit Card Purchase 2,117.71 2008 Miscellaneous Purchases 4	Account No. xxxx-xxxx-4631	1	H	8/2007	\top	T	t	
P. O. Box 30395 Salt Lake City, UT 84130-0395 H Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of		1		Credit Card Purchase				
P. O. Box 30395 Salt Lake City, UT 84130-0395 H	Discover Card							
Salt Lake City, UT 84130-0395 Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of 2008 Miscellaneous Purchases 1,705.69 Business Freight Shipments W 300.00			н					
Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of			١.,					
Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of 2008 Miscellaneous Purchases 1,705.69 1,705.69 8usiness Freight Shipments 300.00	Sait Lake City, UT 84130-0395							
Account No. xxx8460 e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of 2008 Miscellaneous Purchases 1,705.69 1,705.69 8usiness Freight Shipments 300.00								
e-bay, Inc. P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Miscellaneous Purchases H W 1,705.69 1,705.69 300.00					\perp			2,117.71
H	Account No. xxx8460			2008				
P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Business Freight Shipments W 300.00		1		Miscellaneous Purchases				
P.O. Box 2179 Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Business Freight Shipments W 300.00	e-bay. Inc.							
Carol Stream, IL 60132 Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal			н					
Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Table 1,705.69 W Business Freight Shipments W Subtotal								
Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Business Freight Shipments W 300.00	Janor Gurcam, 12 00 102							
Account No. xxxx-x424-0 Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Business Freight Shipments W 300.00								4 705 00
Federal Express P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal		┖			丄			1,705.69
P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal	Account No. xxxx-x424-0	1		Business Freight Shipments				
P.O. Box 7221 Pasadena, CA 91109-7321 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal		1						
Pasadena, CA 91109-7321 300.00 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal 48.771.53		1					1	
Pasadena, CA 91109-7321 300.00 Sheet no. 6 of 15 sheets attached to Schedule of Subtotal 48.771.53	P.O. Box 7221	1	W				1	
Sheet no. 6 of 15 sheets attached to Schedule of Subtotal 300.00		1					1	
Sheet no. 6 of 15 sheets attached to Schedule of Subtotal	·	1					1	
Sheet no. 6 of 15 sheets attached to Schedule of Subtotal								300 00
1 49 771 50					\perp			300.00
Creditors Holding Unsecured Nonpriority Claims (Total of this page) 48,771.52	Sheet no. 6 of 15 sheets attached to Schedule of				Sub	tota	ıl	40 774 50
	Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pas	ge)	48,771.52

In re	James A. Hulin,	Case No	09-23231
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	1.				1	-	1
CREDITOR'S NAME,	CODEBT	Hu	sband, Wife, Joint, or Community	CONT	UNL	P	
MAILING ADDRESS	Ď	Н	DATE CLANA WAS DISCUSDED AND	Ň	ĮË	ISPUTED	
INCLUDING ZIP CODE,	I E	w	DATE CLAIM WAS INCURRED AND	ΙŢ	Ι'n	I P	
AND ACCOUNT NUMBER	Ť	J	CONSIDERATION FOR CLAIM. IF CLAIM	lΝ	ű	Ť	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	G	Ľ	ΙE	
·	<u> </u>			G E N T	A		
Account No. xxxx-xxxx-1079	4		Credit Card Purchases	'	QUIDATED		
GEMB/Care Credit				-	۲	+	1
		Н					
P. O. Box 981127		-					
El Paso, TX 79998							
							Unknown
Account No. xxxx-xxxx-y073			Credit Card Purchases	\top			
CEMP/Care Credit							
GEMB/Care Credit		\.			1		
P.O. Box 981127		W					
El Paso, TX 79998							
							Unknown
Account No. xxx-xxxx-xxxx-3644	1	\vdash	8/2007	+	T	T	
	1		Credit Card Purchases				
CEMP/Lampay Compiles Exports							
GEMB/Lennox-Service Experts		١.					
P.O. Box 981439		J					
El Paso, TX 79998							
							7,553.83
Account No. xxxx-xxxx-3636	+		8/2007	+	╁	\vdash	
Ticcount 10. AAAA AAAA AAAA COO	-		Credit Card Purchaes				
			orealt Gara Farchaes				
GEMB/Lennox-Service Experts							
P.O. Box 981439		W					
El Paso, TX 79998							
, ·							
							7,714.14
Account No. xxx-xxxx-x5240	╁	\vdash	4/2007	+	+	\vdash	1,
Account 110. AAA-AAAA-A324U	4	1	Surrendered 2007 GMC Yukon		1		
		1	Surrendered 2007 GIVIC TUKON		1		
GMAC		1			1		
P. O. Box 78234		W			1		
Phoenix, AZ 85062-8234		1			1		
		1			1		
		1			1		
							40,906.00
Sheet no7 of _15_ sheets attached to Schedule of	•			Sub	tota	al	
			(Total of				56,173.97
Creditors Holding Unsecured Nonpriority Claims			(1otal of	uns	pag	ge)	

In re	James A. Hulin,	Case No	09-23231
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

				_			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	B T	Hu: H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	DZ1-QU-DATHD	DISPUTED	AMOUNT OF CLAIM
Account No. Unknown			Unknown	٦	E		
Greg Ballard Ballard Construction Co. 6210 Annie Oakley Drive, Ste. 102 Las Vegas, NV 89120		С	Contractor for Windmill Property				Unknown
Account No.			Attorney Fees and Costs (Atty for Pacific		T		
Helm & Associates 2810 W. Charleston Blvd., Ste. G-67 Las Vegas, NV 89102		С	Design)			x	1,245.35
	Ш			_			1,245.55
Account No. Unknown High Point Bank & Trust Company 300 N. Main Street High Point, NC 27260		н	Unknown Guarantor on loan to repair/replace roof of Real Property located at 1251 Surrett Drive, High Point, North Carolina, 27260				
7000				_			Unknown
Account No. xxxx-xxxx-7923 Home Depot Credit Services P.O. Box 6028 The Lakes, NV 88901		w	2008 Credit Card Purchases				505.44
Account No. Unknown	Н		Unknown	+		\vdash	686.14
Hutchens, Senter & Britton, PA P.O. Box 2505 Minneapolis, MN 55438-0901		J	Attorneys Fees & Costs (Greensboro Foreclosure)				Unknown
Sheet no. _8 of _15 _ sheets attached to Schedule of				Sub	L tota	L d	
Creditors Holding Unsecured Nonpriority Claims			(Total of				1,931.49

In re	James A. Hulin,	Case No	09-23231
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

		_		_	_	_	1
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	CO	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	A A B	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONT L NGEN	L Q U	S P U T	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx6469			PinWizards Merchant Processing	٦т	T		
Innovative Merchant 21215 Burbank Blvd., Ste 100 Woodland Hills, CA 91367		н			D		47.37
Account No. Unknown			Unknown Business Partner		<u> </u>		
John Raines P.O. Box 2553 High Point, NC 27261		_	Dusiliess Faither				
Account No. Unknown			Unknown				Unknown
Jonathan Baktari, MD c/o Omni Group Development 338 Wiseton Avenue Las Vegas, NV 89183		J	Landlord of Windmill Property				Unknown
Account No. Unknown			Unknown		T	T	
Joseph Perez, OD 3829 Tinsley Drive High Point, NC 27265		w	Medical Services				50.00
Account No.	t		Any General Claims				
Karen Price Hulin 712 Hillcrest Drive High Point, NC 27262		н					Unknown
						_	Olikilowii
Sheet no. _9 of _15 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			97.37

In re	James A. Hulin,	Case No. 09-23231	
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	-			1 -	1.	1 -	1
CREDITOR'S NAME, MAILING ADDRESS	СОДЕВН	н	sband, Wife, Joint, or Community	C O N T	N L	D I S	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	E B T O R	: 8 J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	T I N G E N T	ΙQ	ISPUTED	AMOUNT OF CLAIM
Account No. Unknown	П		Unknown	7	TE		
Liberty Fire Service 1306 W. Craig Road, Ste. E-155 North Las Vegas, NV 89032		С	Contractor for Windmill Property		D		Unknown
Account No. xxxxxxxxxxx5466	H		8/2002	+	+	+	
Lowe's P.O. Box 530914 Atlanta, GA 30353		Н	Credit Card Purchases				
					\perp		13,583.93
Account No. xx-xxx-xxx-321-0 Macy's P.O. Box 689194 Des Moines, IA 50368		н	11/2008 Credit Card Purchases				
							371.30
Account No. Unknown Massage Envy 711 Marks Street Henderson, NV 89015		Н	Unknown Membership (Cancelled)			x	
							59.00
Account No. xxxx xxx5 834	П		2008 Credit Card Purchaes				
Mervyns PO Box 981064 EI Paso, TX 79998		W	Ordan Jaiu i dicilaes				
							125.25
Sheet no. _10 of _15 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			14,139.48

In re	James A. Hulin,	Case No. 09-23231	
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITORIC NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. xxxxxxxxxxx1737	CODEBTOR	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXF_XGEXF	QUIDAT	DISPUTED	AMOUNT OF CLAIM
Account 10. ARABARAR 1101			ADT Alarm System		E D		
NCO Financial 507 Prudential Road Horsham, PA 19044		С	•			х	139.75
Account No. Unknown			Unknown	+			
Nevada Construction Services 2500 North Buffalo, Suite 140 Las Vegas, NV 89128		С	Contractor for Windmill Property				
							Unknown
Account No. xxxx-x424-0 North Shore Agency 270 Spagnoli Road Melville, NY 11747		w	Unknown Freight Account				138.86
Account No.			Business Expense - Contractor	+			
Pacific Design Concepts 3005 Horizon Ridge Parkway, Ste. 200 Henderson, NV 89052		С					Unknown
Account No. Unknown	\vdash	L	Unknown	+			
Paul Coscarelli 736 Piney Ridge Way Monument, CO 80132		С	Landlord of 250 Conestoaga Way/Former Partner				Unknown
Sheet no. 11 of 15 sheets attached to Schedule of		<u> </u>		Subt	tota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				278.61

In re	James A. Hulin,	Case No	09-23231
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L Q D L	T F	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxx5529	1		Unknown Miscellaneous Purchases	⊢ Ñ T	DATED		
PayPal, Inc. 11128 John Galt Blvd. Omaha, NE 68137		Н	Wiscenaneous Fulchases				040.45
Account No. xxxx0482	╁		Unknown	+	-	-	313.45
Protection One P.O. Box 5714 Carol Stream, IL 60197-5714		С	Security Services - Business				3,300.00
Account No. xxxxxxxx1881	+		Unknown PinWizards Merchang Processing				,
Sam's Club Merchant Credit Card Process. P.O. Box 6600 Hagerstown, MD 21741-6600		w					60.00
Account No. xxxxxxxx3886	╁		Unknown	+		+	30.00
Sam's Club Merchant Credit Card Process. P.O. Box 6600 Hagerstown, MD 21741-6600		w	Ninth Island Merchant Processing				413.88
Account No. xxxxxxxx4884			Unknown				410.00
Sam's Club Merchant Credit Card Process. P.O. Box 6600 Hagerstown, MD 21741-6600		w	Shipping Wizards Merchant Processing				30.00
Sheet no. 12 of 15 sheets attached to Schedule of	 [<u> </u>		Sub	tota	 al	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	4,117.33

In re	James A. Hulin,	Case No	09-23231
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CDED ITODIG VALVE	С	Hu	sband, Wife, Joint, or Community	CO	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	S L L Q U L D A T	DISPUTED	AMOUNT OF CLAIM
Account No. xxxx-xxxx-0166			03/1997	Т	T E D		
Sears Gold P.O. Box 6275 Sioux Falls, SD 57117		н	Credit Card Purchases				14,147.13
Account No. Unknown	┢		Unknown		-		14,147.13
Sementhia "Cindy" Mackie 5519 Westerborn Drive Greensboro, NC 27407		С	Tenant in Greensboro / Currently owes back rent to Debtors for June and July @ \$1,000.00 each month. However, Debtors have \$1,000.00 security deposit from her.				
							Unknown
Account No. Unknown Service Max 3291 E Patrick Ln Las Vegas, NV 89120	-	С	Unknown Contractor for Windmill Property				Unknown
Account No. VSDxxxxx4639	╁		9/16/2008				
Shadow Emergency Physicians P. O. Box 13917 Philadelphia, PA 19101		w	Medical Bill				572.00
Account No.			Business Expense - Contractor				
Sign-A-Rama 3460 E. Sunset Road, Ste. R Las Vegas, NV 89120		С					Unknown
Sheet no13_ of _15_ sheets attached to Schedule of				Subi	tota	11	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				14,719.13

In re	James A. Hulin,	Case No	09-23231
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	L Q U	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxx4639			9/16/2008	Т	T E D		
Spring Valley Hospital Medical Center 8801 W. Sahara Avenue, 1st Floor Las Vegas, NV 89117		w	Medical Bill				548.80
Account No. Unknown	╁		Unknown	+	+	+	
Stout Electric 6440 Schrills Street Las Vegas, NV 89118		С	Contractor for Windmill Property				Unknown
Account No. x-xxx-xx1-549	╀	_	11/2006	+	+	-	Unknown
Target P.O. Box 573 Minneapolis, MN 55440		н	Credit Card Purchases				713.75
Account No. Unknown	╁		Unknown	+	$\frac{1}{1}$	-	
Thompson Drywall 5670 N. Park Street Las Vegas, NV 89149		С	Contractor				
Account No. Hakagua	-		Haknowa				Unknown
Account No. Unknown Tia Crouch / Allen Tate Realtors 717 Green Valley Road Greensboro, NC 27408		С	Unknown Real Estate Agent - Greensboro Property				Unknown
Sheet no. 14 of 15 sheets attached to Schedule of				Sub	tota	ıl	4 262 55
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pa	ge)	1,262.55

In re	James A. Hulin,	Case No. 09-23231	
	Michelle M. Hulin		

Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

				_	_		1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	11	DISPUTED	
Account No. xxF5R1 UPS P.O. Box 650580 Dallas, TX 75265-0580		С	Unknown Freight Account	T	T E D		
					L		207.72
Account No. Unknown Vegas Valley Fire Service 5740 S. Arville Street, Ste. 203 Las Vegas, NV 89118		С	Unknown Contractor for Windmill Property				
Account No. Unknown			Unknown	igspace	_		Unknown
Verry Best Sign Company 4460 W. Hacienda Ave., Ste. 108 Las Vegas, NV 89118		С	Contractor for Windmill Property				
					L		Unknown
Account No. Unknown Windmill Partners 4755 Dean Martin Drive Las Vegas, NV 89103		С	Unknown Unpaid Business Rent as of June 2009 / Windmill Commercial Lease				24,637.13
Account No.							
Sheet no15_ of _15_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	_		(Total of t	Subt			24,844.85
			(Report on Summary of So		Γota dule		395,048.12

United States Bankruptcy Court District of Nevada

	James A. Hulin			
In re	Michelle M. Hulin		Case No.	09-23231
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX - AMENDED

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	September 2, 2009	/s/ James A. Hulin	
		James A. Hulin	
		Signature of Debtor	
Date:	September 2, 2009	/s/ Michelle M. Hulin	
		Michelle M. Hulin	
		Signature of Debtor	

James A. Hulin Michelle M. Hulin 7561 Cougar Creek Circle Las Vegas, NV 89123

Delwyn E. Webber, Esq. Rob Graham & Associates 7375 West Peak Drive, Suite 220 Las Vegas, NV 89128

Academy Collection Acct No xxxx-xxxx-xxxx-0166 10965 Decatur Philadelphia, PA 19154-3210

Al Schwerin Acct No Unknown 9647 Lark Circle Fountain Valley, CA 92708

Alpha Electrical Signs, Inc. Acct No Unknown dba Olympic Neon 5225 Wynn Road Las Vegas, NV 89118

America Service Company Acct No xxxxxx2250 PO Box 10388 Des Moines, IA 50306-0388

America's Servicing Company Acct No xxxxxx2250 P. O. Box 60768 Los Angeles, CA 90060-0768

American Express Acct No xxxx-xxxxx0-51009 P.O. Box 0001 Los Angeles, CA 90096-8000

American Express Acct No xxxx-xxxxxx-x1283 PO Box 297812 Fort Lauderdale, FL 33329

American Express
Acct No xxxx-xxxxxx-x2381
PO Box 981537
El Paso, TX 79998

American Medical Response - Nevada Acct No xxxxx4020 P.O. Box 3429 Modesto, CA 95353 AMO Recoveries Acct No x-xxx-xx1-549 3120 McDougall Avenue, Ste. 100 Everett, WA 98201

AT&T Acct No 835645097 P.O. Box 6463 Carol Stream, IL 60197

Bank of America Acct No NC HELOC xxxx-xxxx-xx6699 P.O. Box 30610 Los Angeles, CA 90030-0610

Bank of America Acct No xxxx-xxxx-xxxx-6479 P.O. Box 17309 Baltimore, MD 21297-1309

Bank of America Acct No xxxx-xxxx-xxxx-3416 P.O. Box 15726 Wilmington, DE 19886-5726

Bank Of America Acct No xxxx-xxxx-xxxx-6695 PO Box 15184 Wilmington, DE 19850-5184

Bank of America Acct No xxxx-xxxx-xxxx-0754 P. O. Box 15026 Wilmington, DE 19850-5026

Bay Area Credit Service, LLC Acct No xxxxx4020 1901 W. 10th Street Antioch, CA 94509

Bright Lights Acct No Unknown 112 Continental Ave Henderson, NV 89015

Capital Management Services Acct No xxxx-xxxx-xxxx-4631 726 Exchange Street, Suite 700 Buffalo, NY 14210

CareCredit/GEMB
Acct No xxxx-xxxx-xxxx-9081
P.O. Box 960061
Orlando, FL 32896

CBCS Acct No xxxxx4639 P.O. Box 69 Columbus, OH 43216

Chase
Acct No xxxx-xxxx-xxxx-7361
P.O. Box 36520
Louisville, KY 40233

Chase
Acct No xxxx-xxxx-6843
P. O. Box 15298
Wilmington, DE 19850-5298

Chrysler Financial Acct No xxxxxx4181 P. O. Box 9001921 Louisville, KY 40290-1921

Citi Acct No xxxxxxxxxxxxx-72 P.O. Box 45129 Jacksonville, FL 32232

Clark County Assessor Acct No xxx-xx-xx3-006 500 S. Grand Central Parkway, 2nd Floor Las Vegas, NV 89155

Collect America Commercial Services, Inc Acct No xxx8460 16011 College Blvd., Ste 101 Lenexa, KS 66219

Cox Communications
Acct No xxx-xxxx-xxxx1101
P. O. Box 3901
Las Vegas, NV 89127-3901

Creditors Interchange Acct No xxxx-xxxx-xxxx-6695 Ref. No. 13539814 NMC Buffalo, NY 14225

Discover Card
Acct No xxxx-xxxx-xxxx-4631
P. O. Box 30395
Salt Lake City, UT 84130-0395

e-bay, Inc. Acct No xxx8460 P.O. Box 2179 Carol Stream, IL 60132 Encore Receivable Management Acct No xxxx-xxxx-xxxx-9081 P. O. Box 3330 400 North Rogers Road Olathe, KS 66063-3330

Federal Express Acct No xxxx-x424-0 P.O. Box 7221 Pasadena, CA 91109-7321

Gatski Commercial Real Estate Services Acct No Unknown 4755 Dean Martin Dr Las Vegas, NV 89103

GC Services
Acct No xxxx-xxxxx0-51009
P. O. Box 39050
Phoenix, AZ 85069

GC Services
Acct No xxxxxxxxxxxxx5529
P.O. Box 3346
Houston, TX 77253

GEMB

Acct No xxxx-xxxx-xxxx-9081 P. O. Box 981127 El Paso, TX 79998

GEMB/Care Credit
Acct No xxxx-xxxx-xxxx-9073
P.O. Box 981127
El Paso, TX 79998

GEMB/Lennox-Service Experts Acct No xxx-xxxx-xxxx-3644 P.O. Box 981439 El Paso, TX 79998

GMAC

Acct No xxx-xxxx-x5240 P. O. Box 78234 Phoenix, AZ 85062-8234

GMAC

Acct No xxx-xxxx-x5240 P. O. Box 380901 Minneapolis, MN 55438-0902

GMAC

Acct No xxx-xxxx-x5240 P. O. Box 380902 Minneapolis, MN 55438-0902 GMAC Payment Processing Center Acct No xxx-xxxx-x5240 P.O. Box 78369 Phoenix, AZ 85062-8369

Greg Ballard Acct No Unknown Ballard Construction Co. 6210 Annie Oakley Drive, Ste. 102 Las Vegas, NV 89120

Helm & Associates 2810 W. Charleston Blvd., Ste. G-67 Las Vegas, NV 89102

High Point Bank & Trust Company Acct No Unknown 300 N. Main Street High Point, NC 27260

Home Depot Credit Services Acct No xxxx-xxxx-xxxx-7923 P.O. Box 6028 The Lakes, NV 88901

Home Depot Credit Services Acct No xxxx-xxxx-xxxx-7923 P. O. Box 689100 Des Moines, IA 50368-9100

Hutchens, Senter & Britton, PA Acct No Unknown P.O. Box 2505 Minneapolis, MN 55438-0901

I. C. System, Inc. Acct No xxx8460 444 Highway 96 East P. O. Box 64887 Saint Paul, MN 55164-0887

Innovative Merchant Acct No xxxxxxxxxxx6469 21215 Burbank Blvd., Ste 100 Woodland Hills, CA 91367

IRS Acct No xxx-xx-9081 & xxx-xx-5622 CA 94201-0030

John Raines Acct No Unknown P.O. Box 2553 High Point, NC 27261 Jonathan Baktari, MD Acct No Unknown c/o Omni Group Development 338 Wiseton Avenue Las Vegas, NV 89183

Joseph Perez, OD Acct No Unknown 3829 Tinsley Drive High Point, NC 27265

Karen Price Hulin 712 Hillcrest Drive High Point, NC 27262

Liberty Fire Service Acct No Unknown 1306 W. Craig Road, Ste. E-155 North Las Vegas, NV 89032

Lowe's Acct No xxxxxxxxxxx5466 P.O. Box 530914 Atlanta, GA 30353

Macy's
Acct No xx-xxx-xxx-321-0
P.O. Box 689194
Des Moines, IA 50368

Mann Bracken LLP Acct No xxxx-xxxxx9-92005 2325 Clayton Road Concord, CA 94520

Massage Envy Acct No Unknown 711 Marks Street Henderson, NV 89015

Mervyns Acct No xxxx xxx5 834 PO Box 981064 El Paso, TX 79998

Nathan Terry 1059 Garnet Ridge Court Las Vegas, NV 89123

NCO Financial Acct No xxxxxxxxxx1737 507 Prudential Road Horsham, PA 19044 Nevada Construction Services Acct No Unknown 2500 North Buffalo, Suite 140 Las Vegas, NV 89128

North Shore Agency Acct No xxxx-x424-0 270 Spagnoli Road Melville, NY 11747

Pacific Design Concepts 3005 Horizon Ridge Parkway, Ste. 200 Henderson, NV 89052

Paul Coscarelli Acct No Unknown 736 Piney Ridge Way Monument, CO 80132

PayPal, Inc. Acct No xxxxxxxxxxxxx5529 11128 John Galt Blvd. Omaha, NE 68137

Protection One Acct No xxxx0482 P.O. Box 5714 Carol Stream, IL 60197-5714

Protection One Alarm Monitoring, Inc. Acct No xxxx0482 Attn: Bankruptcy Department PO Box 49292 Wichita, KS 67202

Sam's Club Merchant Credit Card Process. Acct No xxxxxxxx1881 P.O. Box 6600 Hagerstown, MD 21741-6600

Sears Gold Acct No xxxx-xxxx-xxxx-0166 P.O. Box 6275 Sioux Falls, SD 57117

Sementhia "Cindy" Mackie Acct No Unknown 5519 Westerborn Drive Greensboro, NC 27407

Service Max Acct No Unknown 3291 E Patrick Ln Las Vegas, NV 89120 Shadow Emergency Physicians Acct No VSDxxxxx4639 P.O.Box 13917 Philadelphia, PA 19101

Sign-A-Rama 3460 E. Sunset Road, Ste. R Las Vegas, NV 89120

Spring Valley Hospital Medical Center Acct No xxxxx4639 8801 W. Sahara Avenue, 1st Floor Las Vegas, NV 89117

Stout Electric Acct No Unknown 6440 Schrills Street Las Vegas, NV 89118

Target
Acct No x-xxx-xx1-549
P.O. Box 573
Minneapolis, MN 55440

THD/CBSD Acct No xxxx-xxxx-xxxx-7923 P.O. Box 6497 Sioux Falls, SD 57117

Thompson Drywall Acct No Unknown 5670 N. Park Street Las Vegas, NV 89149

Tia Crouch / Allen Tate Realtors Acct No Unknown 717 Green Valley Road Greensboro, NC 27408

UPS Acct No xxF5R1 P.O. Box 650580 Dallas, TX 75265-0580

Vegas Valley Fire Service Acct No Unknown 5740 S. Arville Street, Ste. 203 Las Vegas, NV 89118

Verry Best Sign Company Acct No Unknown 4460 W. Hacienda Ave., Ste. 108 Las Vegas, NV 89118 Wells Fargo Home Mortgage Acct No xxx2374 P.O. Box 6417 Carol Stream, IL 60197

Windmill Partners Acct No Unknown 4755 Dean Martin Drive Las Vegas, NV 89103

Case 09-23231-lbr Doc 26 Entered 09/02/09 16:02:00 Page 37 of 43

B22A (Official Form 22A) (Chapter 7) (12/08)

	A. Hulin le M. Hulin	According to the information required to be entered on this statement
	Debtor(s)	(check one box as directed in Part I, III, or VI of this statement):
Case Number:	09-23231 (If known)	—— ■ The presumption arises.
	(II Kilowii)	☐ The presumption does not arise.
		☐ The presumption is temporarily inapplicable.

AMENDED

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and ☐ I remain on active duty /or/ ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	 b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/ ☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. \square Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") 2 for Lines 3-11. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six Column A Column B calendar months prior to filing the bankruptcy case, ending on the last day of the month before Spouse's Debtor's the filing. If the amount of monthly income varied during the six months, you must divide the Income **Income** six-month total by six, and enter the result on the appropriate line. 3 Gross wages, salary, tips, bonuses, overtime, commissions. 0.00 \$ 0.00 **Income from the operation of a business, profession or farm.** Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. 4 Debtor Spouse 9,655.71 Gross receipts 9,655.71 Ordinary and necessary business expenses 7,478.77 \\$ 7.478.77 Business income Subtract Line b from Line a 2,176.94 2,176.94 Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. **Do not include any** part of the operating expenses entered on Line b as a deduction in Part V. 5 Debtor Spouse Gross receipts 0.00 | \$ 0.00 Ordinary and necessary operating expenses 0.00 | \$ 0.00 Rent and other real property income Subtract Line b from Line a 0.00 0.00 6 Interest, dividends, and royalties. 0.00 0.00 7 Pension and retirement income. 0.00 0.00 Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that 8 purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. 0.00 0.00 **Unemployment compensation.** Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ **0.00** Spouse \$ 0.00 0.00 \$ 0.00 **Income from all other sources.** Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or 10 domestic terrorism. Debtor Spouse **Real Estate Property** 2,000.00 | \$ 0.00 Total and enter on Line 10 2,000.00 0.00 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if 11 Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). 4,176.94 2,176.94

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		6,353.88		
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	76,246.56		
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: NV b. Enter debtor's household size: 3	\$	65,783.00		
15	pplication of Section 707(b)(7). Check the applicable box and proceed as directed. The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.				
	■ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.				

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

1	Complete 1 arts 14, 4, 41, and 411 of this statement only if required. (See Ellie 13.)				
	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2	2)			
16	Enter the amount from Line 12.	\$	6,353.88		
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. S				
	b. \$				
	c. \$				
	d. \$				
	Total and enter on Line 17	\$	0.00		
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$	6,353.88		
	Part V. CALCULATION OF DEDUCTIONS FROM INCOME				
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)				
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.				
	Household members under 65 years of age Household members 65 years of age or older				
	a1. Allowance per member 60 a2. Allowance per member 144				
	b1. Number of members 3 b2. Number of members 0				
	c1. Subtotal 180.00 c2. Subtotal 0.00	\$	180.00		
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is				
20A	available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court).	\$	419.00		
		Ψ	713.00		

20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your cour available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of Monthly Payments for any debts secured by your home, as stated in L the result in Line 20B. Do not enter an amount less than zero.				
	a. IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,253.00			
	b. Average Monthly Payment for any debts secured by your				
	home, if any, as stated in Line 42 c. Net mortgage/rental expense	\$ 2,432.21 Subtract Line b from Line a.	Φ 0.00		
		•	\$ 0.00		
21	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are enti Standards, enter any additional amount to which you contend you are contention in the space below:	tled under the IRS Housing and Utilities	\$ 0.00		
	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are				
22A	included as a contribution to your household expenses in Line 8. □ 0 ■ 1 □ 2 or more.				
	If you checked 0, enter on Line 22A the "Public Transportation" amount Transportation. If you checked 1 or 2 or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/	"Operating Costs" amount from IRS Local e applicable Metropolitan Statistical Area or	\$ 211.00		
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy				
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)				
	□ 1 □ 2 or more.				
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.				
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00			
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42	\$ 0.00			
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$ 0.00		
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.				
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00			
	Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 42	\$ 0.00			
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$ 0.00		
25	Other Necessary Expenses: taxes. Enter the total average monthly estate and local taxes, other than real estate and sales taxes, such as inc security taxes, and Medicare taxes. Do not include real estate or sale				
<u></u>	J,		\$ 283.00		

26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.			0.00
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.			60.00
28	Other Necessary Expenses: court-ordered payments. pay pursuant to the order of a court or administrative age include payments on past due obligations included in	ency, such as spousal or child support payments. Do not	\$	350.00
29		t or for a physically or mentally challenged child. Enter and for education that is a condition of employment and for allenged dependent child for whom no public education	\$	0.00
	Other Necessary Expenses: childcare. Enter the total a	avarage monthly amount that you actually avanad on	Ψ	0.00
30	childcare - such as baby-sitting, day care, nursery and pro		\$	0.00
31	Other Necessary Expenses: health care. Enter the total health care that is required for the health and welfare of y insurance or paid by a health savings account, and that is include payments for health insurance or health saving	yourself or your dependents, that is not reimbursed by s in excess of the amount entered in Line 19B. Do not	\$	0.00
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as			297.66
33	Note: Do not include any exp	nal Living Expense Deductions benses that you have listed in Lines 19-32	\$	2,952.66
	Subpart B: Addition	nal Living Expense Deductions enses that you have listed in Lines 19-32 avings Account Expenses. List the monthly expenses in	\$	2,952.66
33	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonab	nal Living Expense Deductions enses that you have listed in Lines 19-32 avings Account Expenses. List the monthly expenses in	\$	2,952.66
	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonab dependents.	nal Living Expense Deductions enses that you have listed in Lines 19-32 avings Account Expenses. List the monthly expenses in oly necessary for yourself, your spouse, or your	\$	2,952.66
	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonab dependents. a. Health Insurance	nal Living Expense Deductions senses that you have listed in Lines 19-32 avings Account Expenses. List the monthly expenses in oly necessary for yourself, your spouse, or your \$ 0.00	\$	2,952.66
	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonable dependents. a. Health Insurance b. Disability Insurance	nal Living Expense Deductions enses that you have listed in Lines 19-32 avings Account Expenses. List the monthly expenses in oly necessary for yourself, your spouse, or your \$ 0.00 \$ 0.00		
	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonable dependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state y below:	nal Living Expense Deductions enses that you have listed in Lines 19-32 avings Account Expenses. List the monthly expenses in oly necessary for yourself, your spouse, or your \$ 0.00 \$ 0.00		
	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonable dependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state y below: \$ Continued contributions to the care of household or far	ranal Living Expense Deductions renses that you have listed in Lines 19-32 ravings Account Expenses. List the monthly expenses in oly necessary for yourself, your spouse, or your \$ 0.00 \$ 0.00 \$ 0.00 \$ wour actual total average monthly expenditures in the space amily members. Enter the total average actual monthly and necessary care and support of an elderly, chronically	\$	0.00
34	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonable dependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state y below: \$ Continued contributions to the care of household or fa expenses that you will continue to pay for the reasonable ill, or disabled member of your household or member of	real Living Expense Deductions renses that you have listed in Lines 19-32 ravings Account Expenses. List the monthly expenses in only necessary for yourself, your spouse, or your \$ 0.00 \$ 0.00 \$ 0.00 \$ our actual total average monthly expenditures in the space armily members. Enter the total average actual monthly expenditure and necessary care and support of an elderly, chronically your immediate family who is unable to pay for such age reasonably necessary monthly expenses that you need the Family Violence Prevention and Services Act or		
34	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Satthe categories set out in lines a-c below that are reasonable dependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state y below: \$ Continued contributions to the care of household or face expenses that you will continue to pay for the reasonable ill, or disabled member of your household or member of expenses. Protection against family violence. Enter the total avera actually incurred to maintain the safety of your family un other applicable federal law. The nature of these expenses Home energy costs. Enter the total average monthly am Standards for Housing and Utilities, that you actually expenses, a	nal Living Expense Deductions venses that you have listed in Lines 19-32 avings Account Expenses. List the monthly expenses in oly necessary for yourself, your spouse, or your \$ 0.00 \$ 0.00 \$ 0.00 cour actual total average monthly expenditures in the space amily members. Enter the total average actual monthly expenses and support of an elderly, chronically your immediate family who is unable to pay for such age reasonably necessary monthly expenses that you need the Family Violence Prevention and Services Act or as is required to be kept confidential by the court. Sound, in excess of the allowance specified by IRS Local pend for home energy costs. You must provide your case	\$	0.00
34 35 36	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonable dependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state y below: \$ Continued contributions to the care of household or fa expenses that you will continue to pay for the reasonable ill, or disabled member of your household or member of expenses. Protection against family violence. Enter the total avera actually incurred to maintain the safety of your family un other applicable federal law. The nature of these expense Home energy costs. Enter the total average monthly am Standards for Housing and Utilities, that you actually expenses, a claimed is reasonable and necessary.	rail Living Expense Deductions renses that you have listed in Lines 19-32 ravings Account Expenses. List the monthly expenses in oly necessary for yourself, your spouse, or your \$ 0.00 \$ 0.00 \$ 0.00 \$ uour actual total average monthly expenditures in the space amily members. Enter the total average actual monthly and necessary care and support of an elderly, chronically your immediate family who is unable to pay for such age reasonably necessary monthly expenses that you have the Family Violence Prevention and Services Act or as is required to be kept confidential by the court. Sound, in excess of the allowance specified by IRS Local pend for home energy costs. You must provide your case and you must demonstrate that the additional amount	\$	0.00
34 35 36	Subpart B: Addition Note: Do not include any exp Health Insurance, Disability Insurance, and Health Satthe categories set out in lines a-c below that are reasonable dependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state y below: \$ Continued contributions to the care of household or face expenses that you will continue to pay for the reasonable ill, or disabled member of your household or member of expenses. Protection against family violence. Enter the total avera actually incurred to maintain the safety of your family un other applicable federal law. The nature of these expenses Home energy costs. Enter the total average monthly am Standards for Housing and Utilities, that you actually expenses, a	mal Living Expense Deductions denses that you have listed in Lines 19-32 divings Account Expenses. List the monthly expenses in only necessary for yourself, your spouse, or your \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 where the total average actual monthly expenses in the space armily members. Enter the total average actual monthly and necessary care and support of an elderly, chronically your immediate family who is unable to pay for such age reasonably necessary monthly expenses that you have the Family Violence Prevention and Services Act or as is required to be kept confidential by the court. The specified by IRS Local pend for home energy costs. You must provide your case and you must demonstrate that the additional amount and services that you dance at a private or public elementary or secondary age. You must provide your case trustee with explain why the amount claimed is reasonable and	\$	0.00

39	e S o	xpe tan r fr	enses exceed the combined allow adards, not to exceed 5% of those	ase. Enter the total average monthly amended and clothing (apparel and combined allowances. (This information ourt.) You must demonstrate that the	d ser on is	vices) in the IRS available at <u>www</u>	National v.usdoj.gov/ust/	\$	0.00
40	C	Con	tinued charitable contribution	6. Enter the amount that you will continuous as defined in 26 U.S.C. §			e form of cash or		
4.1	+							\$	0.00
41	1	ota	al Additional Expense Deduction	ons under § 707(b). Enter the total of I				\$	0.00
				Subpart C: Deductions for De	ebt I	Payment			
42	o a a b	wn nd mo anl	, list the name of the creditor, id check whether the payment inclu- unts scheduled as contractually of	s. For each of your debts that is secured entify the property securing the debt, and des taxes or insurance. The Average M due to each Secured Creditor in the 60 recessary, list additional entries on a sep 42.	nd sta lonth montl	te the Average N ly Payment is the hs following the	Ionthly Payment, total of all filing of the		
			Name of Creditor	Property Securing the Debt	Α	verage Monthly Payment	Does payment include taxes or insurance?		
		a.	America's Servicing Company	Real property Location: 7561 Cougar Creek Circle, Las Vegas NV	\$	1,882.21	□yes ■no		
		b.	Bank of America	Real property Location: 7561 Cougar Creek Circle, Las Vegas NV	\$	550.00	□yes ■no		
					7	Total: Add Lines		\$	2,432.21
43	n y p	oui ayr um	or vehicle, or other property necestrated in Line 42, in order is in default that must be paid in following chart. If necessary, list	If any of debts listed in Line 42 are secessary for your support or the support of the "cure amount") that you must pay to maintain possession of the property. Torder to avoid repossession or foreclosus additional entries on a separate page.	f you the o The o	r dependents, yo creditor in addition cure amount wou list and total any	u may include in on to the ld include any such amounts in		
		a.	Name of Creditor -NONE-	Property Securing the Debt		1/60th of th	e Cure Amount		
					•		otal: Add Lines	\$	0.00
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.				\$	96.67			
	(ha	pter 13 administrative expense	s. If you are eligible to file a case under	r Cha	pter 13, complet	e the following	Ψ	
	c	har	t, multiply the amount in line a b	by the amount in line b, and enter the re	sultir	ng administrative	expense.		
		a.	Projected average monthly (\$		0.00		
45		b.		listrict as determined under schedules ce for United States Trustees. (This					
			information is available at w	ww.usdoj.gov/ust/ or from the clerk of			10.00		
	-	с.	the bankruptcy court.) Average monthly administra		X			¢.	
46	7	ota		tive expense of Chapter 13 case		tal: Multiply Lin	es a and b	D)	0.00
	I		al Deductions for Debt Paymen	tive expense of Chapter 13 case t. Enter the total of Lines 42 through 45	То	tal: Multiply Lin	es a and b	\$ \$	
	1				То 5.		es a and b	\$	0.00 2,528.88
47	ı			t. Enter the total of Lines 42 through 45	To 5.	1 Income	es a and b		
47	ı		al of all deductions allowed uno	t. Enter the total of Lines 42 through 45 Subpart D: Total Deductions f	To 5.	1 Income 41, and 46.		\$	2,528.88
47	Т	\ota	al of all deductions allowed und Part VI. D	t. Enter the total of Lines 42 through 45 Subpart D: Total Deductions f ler § 707(b)(2). Enter the total of Lines	To 5. 33, 4 b)(2)	1 Income 41, and 46.		\$	2,528.88
	Т	Cota	al of all deductions allowed und Part VI. D er the amount from Line 18 (C	t. Enter the total of Lines 42 through 45 Subpart D: Total Deductions for \$707(b)(2). Enter the total of Lines ETERMINATION OF \$707(b)	To 5. 33, 4 b)(2)	Income 41, and 46. PRESUMP		\$	2,528.88 5,481.54
48	T E	Cota Ente	al of all deductions allowed und Part VI. D er the amount from Line 18 (C er the amount from Line 47 (To	t. Enter the total of Lines 42 through 45 Subpart D: Total Deductions f ler § 707(b)(2). Enter the total of Lines ETERMINATION OF § 707(b) urrent monthly income for § 707(b)(2)	To 5. 6 33, 4 6)(2) 707(1 Income 41, and 46.) PRESUMP (b)(2))	ΓΙΟΝ	\$ \$	2,528.88 5,481.54 6,353.88

51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the					
	result.	\$ 52,340.40				
	Initial presumption determination. Check the applicable box and proceed as directed.					
	☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of p statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.	page 1 of this				
52	■ The amount set forth on Line 51 is more than \$10,950 Check the box for "The presumption arises" at the top statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remain					
	☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Li	nes 53 through 55).				
53	Enter the amount of your total non-priority unsecured debt	\$				
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$				
	Secondary presumption determination. Check the applicable box and proceed as directed.	•				
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not ari of this statement, and complete the verification in Part VIII.	se" at the top of page 1				
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presump of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.	tion arises" at the top				
	Part VII. ADDITIONAL EXPENSE CLAIMS					
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.					
56	Expense Description Monthly Amor	unt				
	a. \$					
	b. \$	_				
	c.	_				
	Total: Add Lines a, b, c, and d \$					
	Part VIII. VERIFICATION					
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a join	int case, both debtors				
	must sign.)					
	Date: September 2, 2009 Signature: /s/ James A. Hulin James A. Hulin					
57	(Debtor)					
37						
	Date: September 2, 2009 Signature /s/ Michelle M. Hulin Michelle M. Hulin					
	(Joint Debtor, if a	any)				
	(volue Zeolot, y e	J /				